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## Substitute for Form PTO-875

Application of Docket Number

Application of Docket Number  
10/783070

(Column 1) (Column 2)

|   |   | (Column 1)   | (Column 2) |
|---|---|--------------|------------|
| FOR   | NUMBER FILED  | NUMBER EXTRA |            |
| BASIC FEE<br>(37 CFR 1.16(m), (n), or (o))        |   |              |            |
| SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m))       |   |              |            |
| EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q))  |   |              |            |
| TOTAL CLAIMS<br>(37 CFR 1.16(l))                  | minus 20 =  | -            |            |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))            | minus 3 =   | -            |            |
| APPLICATION SIZE FEE<br>(37 CFR 1.16(s))          | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |              |            |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) |   |              |            |

\* If the difference in column 1 is less than zero, enter 0 in column 2.

| (Column 1) | (Column 2) | (Column 3) |
|------------|------------|------------|
|------------|------------|------------|

| AMENDMENT A                         | (Column 1)                                |    | (Column 2)                                  |    | (Column 3)      |
|-------------------------------------|---|----|---|----|-----------------|
|                                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |    | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |    | PRESENT<br>COST |
| 10/6/05                             | Total<br>(37 CFR 1.56)                    | 20 | Monies                                      | 22 |                 |
|                                     | Indep. Inv.<br>(37 CFR 1.56)              | 3  | Monies                                      | 3  |                 |
| Application Submitted (37 CFR 1.56) |   |    |   |    |                 |
| Application Approved (37 CFR 1.56)  |   |    |   |    |                 |

| SMALL ENTITY            |                     |
|-------------------------|---------------------|
| RATE (\$)               | ADDITIONAL FEE (\$) |
| .25 =                   |                     |
| .100 =                  |                     |
|                         |                     |
|                         |                     |
| TOTAL<br>ADDITIONAL FEE |                     |

OR

OTHER THAN  
SMALL ENTITY

|     | RATE (\$)       | ADDITIONAL FEE (\$) |
|-----|-----------------|---------------------|
| CIR | .50             |                     |
| CIF | 200             |                     |
| CIF |                 |                     |
| CIF |                 |                     |
| CIF | TOTAL ADD'L FEE |                     |

| AMENDMENT B |    | CLARIS REMARKS AFTER AMENDMENT |  | REMARKS | REMARKS | REMARKS |
|-------------|----|--------------------------------|--|---------|---------|---------|
| 1           | 1  |                                |  |         |         |         |
| 2           | 2  |                                |  |         |         |         |
| 3           | 3  |                                |  |         |         |         |
| 4           | 4  |                                |  |         |         |         |
| 5           | 5  |                                |  |         |         |         |
| 6           | 6  |                                |  |         |         |         |
| 7           | 7  |                                |  |         |         |         |
| 8           | 8  |                                |  |         |         |         |
| 9           | 9  |                                |  |         |         |         |
| 10          | 10 |                                |  |         |         |         |
| 11          | 11 |                                |  |         |         |         |
| 12          | 12 |                                |  |         |         |         |
| 13          | 13 |                                |  |         |         |         |
| 14          | 14 |                                |  |         |         |         |
| 15          | 15 |                                |  |         |         |         |
| 16          | 16 |                                |  |         |         |         |
| 17          | 17 |                                |  |         |         |         |
| 18          | 18 |                                |  |         |         |         |
| 19          | 19 |                                |  |         |         |         |
| 20          | 20 |                                |  |         |         |         |
| 21          | 21 |                                |  |         |         |         |
| 22          | 22 |                                |  |         |         |         |
| 23          | 23 |                                |  |         |         |         |
| 24          | 24 |                                |  |         |         |         |
| 25          | 25 |                                |  |         |         |         |
| 26          | 26 |                                |  |         |         |         |
| 27          | 27 |                                |  |         |         |         |
| 28          | 28 |                                |  |         |         |         |
| 29          | 29 |                                |  |         |         |         |
| 30          | 30 |                                |  |         |         |         |
| 31          | 31 |                                |  |         |         |         |
| 32          | 32 |                                |  |         |         |         |
| 33          | 33 |                                |  |         |         |         |
| 34          | 34 |                                |  |         |         |         |
| 35          | 35 |                                |  |         |         |         |
| 36          | 36 |                                |  |         |         |         |
| 37          | 37 |                                |  |         |         |         |
| 38          | 38 |                                |  |         |         |         |
| 39          | 39 |                                |  |         |         |         |
| 40          | 40 |                                |  |         |         |         |
| 41          | 41 |                                |  |         |         |         |
| 42          | 42 |                                |  |         |         |         |
| 43          | 43 |                                |  |         |         |         |
| 44          | 44 |                                |  |         |         |         |
| 45          | 45 |                                |  |         |         |         |
| 46          | 46 |                                |  |         |         |         |
| 47          | 47 |                                |  |         |         |         |
| 48          | 48 |                                |  |         |         |         |
| 49          | 49 |                                |  |         |         |         |
| 50          | 50 |                                |  |         |         |         |
| 51          | 51 |                                |  |         |         |         |
| 52          | 52 |                                |  |         |         |         |
| 53          | 53 |                                |  |         |         |         |
| 54          | 54 |                                |  |         |         |         |
| 55          | 55 |                                |  |         |         |         |
| 56          | 56 |                                |  |         |         |         |
| 57          | 57 |                                |  |         |         |         |
| 58          | 58 |                                |  |         |         |         |
| 59          | 59 |                                |  |         |         |         |
| 60          | 60 |                                |  |         |         |         |
| 61          | 61 |                                |  |         |         |         |
| 62          | 62 |                                |  |         |         |         |
| 63          | 63 |                                |  |         |         |         |
| 64          | 64 |                                |  |         |         |         |
| 65          | 65 |                                |  |         |         |         |
| 66          | 66 |                                |  |         |         |         |
| 67          | 67 |                                |  |         |         |         |
| 68          | 68 |                                |  |         |         |         |
| 69          | 69 |                                |  |         |         |         |
| 70          | 70 |                                |  |         |         |         |
| 71          | 71 |                                |  |         |         |         |
| 72          | 72 |                                |  |         |         |         |
| 73          | 73 |                                |  |         |         |         |
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| 80          | 80 |                                |  |         |         |         |
| 81          | 81 |                                |  |         |         |         |
| 82          | 82 |                                |  |         |         |         |
| 83          | 83 |                                |  |         |         |         |
| 84          | 84 |                                |  |         |         |         |

| DATE (\$) | ADDITIONAL FEE (\$) |
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| 100       |                     |

|       | RATE (\$) | ADDITIONAL FEE (\$) |
|-------|-----------|---------------------|
| ONE   | " "       |                     |
| TWO   | " "       |                     |
| THREE |           |                     |
| FOUR  |           |                     |
| FIVE  | TOTAL     | ADDITIONAL FEE      |

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